

BHARATHIAR UNIVERSITY :COIMBATORE 641 046

Application for Guest Faculties at Bharathiar University, Coimbatore
(Strike out whichever is not applicable)

Name of the Department: Name of the post: **GUEST FACULTY**

Advertisement No :

1. a. Name of the candidate :

b. Contact Phone No. :

c. Mobile No. :

d. E-mail :

e. Address for communication :

**Affix Passport
size colour
Photograph**

2. Date of Birth :
[Evidence should be enclosed]

3. Religion : Nationality:
(By birth/by domicile)

4. a. Community : SC/ST/SCA/MBC/DNC/BC/FC
(Enclose self attested copy of the Community Certificate issued by the competent authority)

b. Caste

c. Mother tongue:

5. a. Educational Qualifications:

(Enclose self attested copy of all relevant certificates)

Sl. NO.	Educational Qualification	Degree and Major Subject	% of Marks	Class	Year of Passing	Name of the Board / University.	Rank if any
1.	School	SSLC					
2.		HSC					
3.	UG						
4.	PG						
5.	M.Phil.						
6.	Ph.D.						
7.	Post doctoral						

5. b. (Enclose self attested copy of all relevant certificates)

SLET/NET/SET	Subject	Year of Passing

6. Teaching Experience:

(Enclose self attested copy of all relevant certificates)

Sl. No	Name of the Post	Name of the Institution	Period		Total Year	Period Month
			From	To		
1.						
2.						
3.						
4.						
5.						

7. Award obtained

(Enclose self attested copy of all relevant certificates)

Sl. No.	National	Sl. No.	International

8. Publications / Books/ Article

(Enclose first page of each publication)

Sl. No.	National	Sl. No.	International

9. Participation in Seminar/Conference

Sl. No.	National	Sl. No.	International

DECLARATION

I declare that all the information given by me are true and correct to the best of my knowledge.

DATE:

SIGNATURE OF THE CANDIDATE

PLACE:

FOR OFFICE USE ONLY

ORIGINAL CERTIFICATES SUBMITTED BY THE CANDIDATE AT THE TIME OF INTERVIEW ARE VERIFIED.

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